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FAX NUMBER	15712738300
FROM	Frederic Douglas
DATE	2009-03-25 18:40:39 GMT
RE	Fax for Gene Crawford

COVER MESSAGE

10/801,194

Inventor: OROUMIEH, Robert

Please forward this fax to Mr. Gene Crawford, Supervisory Patent Examiner 571-272-6911.

Thanks.

Frederic M. Douglas

(949) 293-0442

Fax (949) 203-8768

fdouglas@cox.net

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PTO/SB/21 (02-09)

Approved for use through 03/31/2009. OMB 0651-0031

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

20

Application Number	10/801,194
Filing Date	Mar. 15, 2004
First Named Inventor	OROUJIEH, Robert
Art Unit	3851
Examiner Name	Waggoner, Timothy
Attorney Docket Number	AM06-01

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	U.S. Patent No. 7,004,350 B2	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Frederic M. Douglas		
Signature	<i>Frederic M. Douglas</i>		
Printed name	Frederic M. Douglas		
Date	March 25, 2009	Reg. No.	48,813

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Frederic M. Douglas	Date	Mar. 25, 2009

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PTO/SB/81A (12-09)

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PATENT - POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Patent Number	7,004,350 B2
	Issue Date	February 28, 2008
	First Named Inventor	ORODUMER, Robert
	Title	DISPENSER FOR TOOTHPICKS AND TABLETS
	Attorney Docket Number	AMD8-01

I hereby revoke all previous powers of attorney given in the above-identified patent.

☐ A Power of Attorney is submitted herewith.

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Frederic M. Douglas	48,813

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☒ Firm or Individual Name: Frederic M. Douglas

Address: 15333 Outver Drive, Suite 340 PMB 114

City: Irvine State: CA Zip: 92604-3051

Country: United States of America

Telephone: 949-233-0442 Email: fdouglas@cor.net

I am the:


☐ Inventor, having ownership of the patent.

OR

☒ Patent owner.

Statement under 37 CFR 3.73(b) (Form PTO/SB/95) submitted herewith or filed on Sep. 21, 2008 (also attached)

SIGNATURE of Inventor or Patent Owner

Signature		Date	3-23-09
Name	Robert Orodumer	Telephone	(825) 925-0963
Title and Company	President, Anity Rubberized Pen Company (Assignee of entire interest)		

NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of one (1) forms are submitted.

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